

BEST AVAILABLE COPY

Lamont Hunter
PCT International Division
(703) 305-8886

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/049327		FILING DATE			
						APPLICANT(S)					
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1							51				
2							52				
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47							97				
48							98				
49							99				
50							100				
AL							TOTAL IND.				
L							TOTAL DEP.				
							TOTAL CLAIMS				

0 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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